REQUEST

CONTINUED EXAMINATION (RCE) **TRANSMITTAL**

Address to: Maii Stop RCE Commissioner for Patents P.O. Box 1450 Aiexandria, VA 22313-1460

Application Number	09/997,974		
Filing Date	November 30, 2001		
First Named Inventor	Daniela Salvemini		
Art Unit	1623		
Examiner Name	Kathieen Kahler Fonda		
Attorney Docket No.	60019610-0235		

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application. Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See Instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2.

314 259 5959

1.	. Submission required under 37 CFR 1.114					
	a.	a. Previously submitted				
		i.	i. Consider the amendment(s)/reply under 37 CFR 1.116 previously filed on (Any unentered amendment(s) referred to above will be entered).			
		ii.	Consider the arguments in the Appeal Brief or Reply Brief previously filed on			
		iii.	Other			
	b.	\boxtimes	nclosed			
		i.	Amendment/Reply iii. Information Disclosure Statement (IDS)			
		ii.	Affidavit(s)/Declaration(s) iv. Other			
2.	2. Misceilaneous					
	a. Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a period of months. (Period of suspension shall not exceed 3 months; Fee under 37 CFR 1.17(I) required)					
	b.		ther			
3.	Fe	905	The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the RCE is filed.			
	a. In connection with this application, the Commissioner is hereby authorized to credit overpayments or to charge any additional fee required to Deposit Account No. 19-3140. A duplicate copy of this sheet is enclosed.					
		i.	☑ RCE fee required under 37 CFR 1.17(e) (\$770.00)			
		ii.				
		iii.	Other			
	b.	\boxtimes	The enclosed credit card payment form in the amount of \$1,720.00 covers the total claim fee and other applicable fees.			
			ARNING: Information on this form may become public. Credit card information should not be cluded on this form. Provide credit card information and authorization on PTO-2038.			
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Name (Print/Type) Kevin W. Buckley						
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Examiner Kathleen Kohler Fonda

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703.872.9306

CLIENT/MATTER.

60019610-0235

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Kevin W. Buckley

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Kevin W. Buckley

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Request for Continued Examination and Amendment and Response to Office

Action Under 27 C.F.R. § 1.116

Applicant's Name:

Daniela Salvemini

Serial No. (Control No.):

09/997,974

Examiner:

Kathleen Kohler Fonda

Filing Date

November 30, 2001

Art Unit:

1623

Application Title:

SODM THERAPY FOR PREVENTION AND/OR TREATMENT OF

INFLAMMATORY DISEASE

Original will NOT be mailed

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